

CITY OF ROCKY MOUNT
Parks and Recreation Department

TRANSFER REQUEST

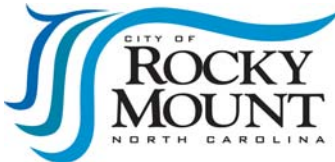
DATE: _____

PARTICIPANT NAME: _____

I, _____, do hereby give full consent to the City of Rocky Mount Parks and Recreation Department (hereafter known as "Department") to transfer the above participant from _____ (Program #1) to _____ (Program #2). I understand that all funds paid toward the Program #1 will be applied toward Program #2, and that any remaining funds will be refunded immediately. I agree to pay to the Department, at the time of the transfer, any balance that may be incurred as a result of the requested transfer.

Payer Signature

Authorized Representative of the Department



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